



**UTAH**  
**AMBULATORY**  
**SURGERY**  
**DATABASE**

**2002**  
**PUBLIC - USE DATA FILE**  
**USER MANUAL**

Version I  
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**UTAH HEALTH DATA COMMITTEE**  
**OFFICE OF HEALTH CARE STATISTICS**  
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## INTRODUCTION

### Utah Health Data Committee

The Utah Health Data Committee, composed of 13 governor-appointed members, was created through the Utah Health Data Authority Act of 1991. The Committee is staffed by the Office of Health Care Statistics, which manages the Utah Ambulatory Surgery Database.

### Utah Ambulatory Surgery Database

Administrative Rule R428.11 became effective in March, 1998, mandating that all Utah licensed hospital and freestanding ambulatory surgical facilities shall report information on selected ambulatory surgeries, beginning with January 1, 1996. The database contains the consolidated information on complete billing, medical codes, and personal characteristics describing a patient, the services received, and charges billed for each visit for a selected subset of ambulatory surgical procedures. Sixty-one Utah ambulatory surgical facilities submitted data in 2002. Rocky Mountain Medical Center closed in the 2<sup>nd</sup> quarter of 2001.

### Selected Ambulatory Surgeries Reported in Utah

Only the following CPT-4 (Current Procedural Terminology) or ICD-9-CM (International Classification of Diseases, 9<sup>th</sup> Revision, Clinical Modification) surgical procedure codes are reported, whether or not they are the principal procedure:

#### TYPES OF SURGICAL SERVICES SUBMITTED IF PERFORMED IN OPERATING OR PROCEDURE ROOM

DESCRIPTION	CPT-4 CODES	ICD-9-CM PROCEDURE CODES
Mastectomy	19120-19220	85.0-85.99
Musculoskeletal	20000-29909	76.0-84.99
Respiratory	30000-32999	30.0-34.99
Cardiovascular	33010-37799	35.0-39.99
Lymphatic/Hematic	38100-38999	40.0-41.99
Diaphragm	39501-39599	ICD-9 Codes in Respiratory
Digestive System	40490-49999	42.0-54.99
Urinary	50010-53899	55.0-59.99
Male Genital	54000-55899	60.0-64.99
Laparoscopy	56300-56399	ICD-9 Codes in Musculoskeletal, Digestive, & Female Genital
Female Genital	56405-58999	65.0-71.99
Endocrine/Nervous	60000-64999	01.0-07.99
Eye	65091-68889	08.0-16.99
Ear	69000-69979	18.0-20.99
Nose, Mouth, Pharynx	CPT Codes in Musculoskeletal & Respiratory	21.0-29.99
Heart Catheterization	93501-93660	ICD-9 Codes in Cardiovascular

## **Public-Use Data Files (PDF)**

The Ambulatory Surgery Public-Use Data Files are designed to provide general health care information to a wide spectrum of users with minimal controls. A request for a PDF can be approved by the Director of the Health Care Statistics without further review.

Two different public data files are released for 2002 ambulatory surgery data (see page 5 for data elements and file descriptions).

## **Data Processing and Quality**

Data submission: The Health Data Plan provides data element definitions to ensure all hospitals will report similar data. The Office of Health Care Statistics receives discharge data quarterly from ambulatory surgical facilities in various formats and media. The data are converted into a standardized format.

System Edits: The data are validated through a process of automated editing and report verification. Each record is subjected to a series of edits that check for accuracy, consistency, completeness, and conformity with the definitions specified in the Data Submittal Manual. Records failing the edit check are returned to the data supplier for correction or comment.

Facility Reviews: Each facility is provided with a 35-day review periods to validate the compiled data against their facility records. Any inconsistencies discovered by the facilities are reevaluated or corrected.

Missing Values: When dealing with unknown values, it is important to distinguish between *systematic* omission by the facility (e.g., for facilities that were granted reporting exemption for particular data elements or which had coding problems that deemed the entire data from the facility unusable), and *non-systematic* omission (e.g., coding problems, invalid codes, etc.). While systematic omission creates potential bias, non-systematic omission is assumed to occur randomly. The user is advised to examine missing values by facility for each data element to be used. The user is likewise advised to examine the number of observations by facility by quarter to judge if a facility under-reported for a given quarter, which occasionally happens due to data processing problems experienced by a facility.

## **Patient Confidentiality**

The Committee has taken considerable efforts to ensure that no individual patient could be identified from the PDF. Patient age and payers are grouped. Utah residential zip codes with less than 30 visits in a calendar year are grouped into county abbreviations, and outside Utah zip codes with less than 30 visits are grouped in state abbreviations.

## **Agreement to Protect Patient Confidentiality**

The data collected by the Utah Health Data Committee may be used only for the purpose of health statistical reporting and analysis or as specified in the user's written request for the data; any effort to determine the identity of any reported cases is prohibited. No one will attempt to link this data set with individually identifiable records from any other data sets.

## **Notes on the 2002 Ambulatory Surgery Data**

This is the seventh year of statewide reporting of ambulatory surgery data in the state of Utah. Data suppliers' information systems vary considerably, as do data formats. Facility-to-facility comparisons are not encouraged for the first four years of data. Comparing hospital-based to freestanding surgery center facilities will be especially challenging due to the differences in billing practice and general operations. Coding practices and formats will evolve over time as the data suppliers adapt to this new statewide reporting requirement.

The data are collected from two types of facilities: hospital-based ambulatory surgery centers and freestanding ambulatory surgery centers. These facilities varied in their reporting of procedure codes in 2002. Most hospital-based surgery centers tended to report ICD9 procedure codes only or both ICD9 and CPT4, while the freestanding ambulatory surgery centers tended to report CPT4 procedure codes only or both ICD9 and CPT4. There is no effective "crosswalk" tool to translate or compare these two procedure coding methods. Therefore, the user will have to be careful in how these data are used. Administrative Rule R428-11 was revised to require reporting of both ICD9 and CPT4 procedure codes starting with the surgeries performed in 1998.

The data include a variable which indicates whether each data record contains only ICD9 codes, only CPT4 codes, or both. The data analyst will find it helpful to compute a cross-tabulation table of facility by this variable (Provider Identifier by Procedure Code Type).

For procedure codes, there is no CPT code that can be used as a PRIMARY procedure code unless it is the only CPT code in a record or if all CPT codes reported on a single record are the same.

## **Data Format**

Standard format for the public data file is fixed ASCII code, on a CD-Rom. Requests for other formats, such as a SAS data set, will be considered.

**Citation**

Any statistical reporting or analysis based on the data shall cite the source as the following:

*Utah Ambulatory Surgical Data File (2002)*. Utah Health Data Committee/Office of Health Care Statistics. Utah Department of Health. Salt Lake City, Utah. 2004.

**Redistribution:**

User shall not redistribute the Utah Ambulatory Surgical Data File in its original format. User shall not redistribute any data products derived from the file without written permission from the Office of Health Care Statistics, Utah Department of Health.

# FILE LAYOUT

# **RECORD LAYOUT OF PUBLIC USE DATA FILE I (2002.1)**

	DATA ELEMENT	TYPE*	WIDTH	POSITION**	EXAMPLE VALUES	Pg
				From To		
1	Provider identifier (hospital)	Char	3	1 - 3	101, 102, ...	9
2	Patient's age (in categories)	Num	3	4 - 6	0,1,...,21	11
3	Patient's gender	Char	1	7 - 7	M,F	12
4	Source of admission	Char	1	8 - 8	1,2,...	12
5	Patient's discharge status	Char	2	9 - 10	01,02,...	13
6	Patient's postal zip code	Char	5	11 - 15	84000, AZ	13
7	Patient's residential county	Num	3	16 - 18	1,2,...	16
8	Patient cross-county migration	Char	1	19 - 19	Y,N	18
9	< blank >		1	20 - 20		
10	Principal diagnosis code	Char	5	21 - 25	8180,81513	18
11	Secondary diagnosis code 1	Char	5	26 - 30	8180,81513	18
12	Secondary diagnosis code 2	Char	5	31 - 35	8180,81513	18
13	Secondary diagnosis code 3	Char	5	36 - 40	8180,81513	18
14	Secondary diagnosis code 4	Char	5	41 - 45	8180,81513	18
15	Procedure 1 as CPT	Char	9	46 - 54	56399, 38100	19
16	Procedure 2 as CPT	Char	9	55 - 63	56399, 38100	19
17	Procedure 3 as CPT	Char	9	64 - 72	56399, 38100	19
18	Procedure code type	Num	3	73 - 75	0,1,2	19
19	Total charge	Num	10	76 - 85	498.68	20
20	Primary payer category	Char	2	86 - 87	01,02,...	20
21	Secondary payer category	Char	2	88 - 89	01,02,...	20
22	Tertiary payer category	Char	2	90 - 91	01,02,...	20
23	< blank >		3	92 - 94		
24	Discharge quarter	Char	1	95 - 95	1,2,3,4	20
25	Record ID number	Num	10	96 - 105	22000010	20
26	Secondary diagnosis code 5	Char	5	106 - 110	8180,81513	18
27	Secondary diagnosis code 6	Char	5	111 - 115	8180,81513	18
28	Secondary diagnosis code 7	Char	5	116 - 120	8180,81513	18
29	Secondary diagnosis code 8	Char	5	121 - 125	8180,81513	18
30	Procedure 4 as CPT	Char	9	126 - 134	56399, 38100	19
31	Procedure 5 as CPT	Char	9	135 - 143	56399, 38100	19
32	Procedure 6 as CPT	Char	9	144 - 152	56399, 38100	19
33	1st procedure category	Num	2	153 - 154	0,1,2,...	21
34	2nd procedure category	Num	2	155 - 156	0,1,2,...	21
35	3rd procedure category	Num	2	157 - 158	0,1,2,...	21
36	4th procedure category	Num	2	159 - 160	0,1,2,...	21
37	5th procedure category	Num	2	161 - 162	0,1,2,...	21
38	6th procedure category	Num	2	163 - 164	0,1,2,...	21
39	Procedure 1 as ICD9	Char	4	165 - 168	480,9711	19
40	Procedure 2 as ICD9	Char	4	169 - 172	480,9711	19
41	Procedure 3 as ICD9	Char	4	173 - 176	480,9711	19
42	Procedure 4 as ICD9	Char	4	177 - 180	480,9711	19
43	Procedure 5 as ICD9	Char	4	181 - 184	480,9711	19
44	Procedure 6 as ICD9	Char	4	185 - 188	480,9711	19

\*Variable Type (if data requested as SAS data set): Char=Character, Num=Numeric

\*\*Column position (if data requested as ASCII file)



# **RECORD LAYOUT OF PUBLIC USE DATA FILE III (2002.3)**

	DATA ELEMENT	TYPE*	WIDTH	POSITION** From To	EXAMPLE VALUES	Pg
1	Provider identifier (hospital)	Char	3	1 - 3	101, 102, ...	9
2	Patient's age (in categories)	Num	3	4 - 6	0,1,...,21	11
3	Patient's gender	Char	1	7 - 7	M,F	12
4	Patient's discharge status	Char	2	8 - 9	01,02,...	13
5	Patient's residential county	Num	3	10 - 12	1,2,...	16
6	Principal diagnosis code	Char	5	13 - 17	8180,81513	18
7	Procedure 1 as CPT	Char	9	18 - 26	56399,38100	19
8	Procedure 2 as CPT	Char	9	27 - 35	56399,38100	19
9	Procedure 3 as CPT	Char	9	36 - 44	56399,38100	19
10	Procedure code type	Num	3	45 - 47	0,1,2	19
11	Total charge	Num	10	48 - 57	498.68	20
12	Primary payer category	Char	2	58 - 59	01,02,...	20
13	Record ID number	Num	10	60 - 69	2000010	20
14	1st procedure category	Num	2	70 - 71	0,1,2,...	21
15	2nd procedure category	Num	2	72 - 73	0,1,2,...	21
16	3rd procedure category	Num	2	74 - 75	0,1,2,...	21
17	Procedure 1 as ICD9	Char	4	76 - 79	480,9711	19
18	Procedure 2 as ICD9	Char	4	80 - 83	480,9711	19
19	Procedure 3 as ICD9	Char	4	84 - 87	480,9711	19

\*Variable Type (if data requested as SAS data set): Char=Character, Num=Numeric

\*\*Column position (if data requested as ASCII file)

# DESCRIPTION OF DATA ELEMENTS

**Provider Identifier** (see Appendix A for alphabetized facility characteristics)

Facility from which patient was discharged (facility name in 2002)

101 = BEAVER VALLEY HOSPITAL  
102 = MILFORD VALLEY MEMORIAL HOSPITAL  
103 = BRIGHAM CITY COMMUNITY HOSPITAL  
104 = BEAR RIVER VALLEY HOSPITAL  
105 = LOGAN REGIONAL HOSPITAL  
106 = CASTLEVIEW HOSPITAL  
107 = LAKEVIEW HOSPITAL  
108 = DAVIS HOSPITAL & MEDICAL CENTER  
109 = UINTAH BASIN MEDICAL CENTER  
110 = GARFIELD MEMORIAL HOSPITAL AND CLINICS  
111 = ALLEN MEMORIAL HOSPITAL  
112 = VALLEY VIEW MEDICAL CENTER  
113 = CENTRAL VALLEY MEDICAL CENTER  
114 = KANE COUNTY HOSPITAL  
115 = FILLMORE COMMUNITY MEDICAL CENTER  
116 = DELTA COMMUNITY MEDICAL CENTER  
117 = JORDAN VALLEY HOSPITAL  
118 = ALTA VIEW HOSPITAL  
119 = COTTONWOOD HOSPITAL MEDICAL CENTER  
120 = SALT LAKE REGIONAL MEDICAL CENTER  
121 = LDS HOSPITAL  
122 = PRIMARY CHILDREN'S MEDICAL CENTER  
124 = ST. MARK'S HOSPITAL  
125 = UNIVERSITY OF UTAH HOSPITALS & CLINICS  
126 = PIONEER VALLEY HOSPITAL  
128 = SAN JUAN COUNTY HOSPITAL  
129 = GUNNISON VALLEY HOSPITAL  
130 = SANPETE VALLEY HOSPITAL  
132 = SEVIER VALLEY HOSPITAL  
133 = TOOELE VALLEY REGIONAL MEDICAL CENTER  
134 = ASHLEY VALLEY MEDICAL CENTER  
135 = OREM COMMUNITY HOSPITAL  
136 = AMERICAN FORK HOSPITAL  
137 = MOUNTAIN VIEW HOSPITAL  
138 = UTAH VALLEY REGIONAL MEDICAL CENTER  
139 = HEBER VALLEY MEDICAL CENTER (beginning Nov 99)  
140 = DIXIE REGIONAL MEDICAL CENTER  
141 = MCKAY-DEE HOSPITAL CENTER  
142 = OGDEN REGIONAL MEDICAL CENTER  
144 = TIMPANOGOS REGIONAL HOSPITAL  
145 = CACHE VALLEY SPECIALTY HOSPITAL (opened 4<sup>th</sup> quarter 2000)  
307 = THE ORTHOPEDIC SPECIALTY HOSPITAL  
401 = CENTRAL UTAH SURGICAL CENTER

403 = INTERMOUNTAIN SURGICAL CENTER  
 404 = MCKAY-DEE SURGICAL CENTER  
 405 = PROVO SURGICAL CENTER  
 406 = SALT LAKE ENDOSCOPY CENTER  
 407 = HEALTHSOUTH SALT LAKE SURGICAL CENTER  
 408 = ST. GEORGE SURGICAL CENTER  
 409 = ST. MARK'S OUTPATIENT SURGICAL CENTER  
 410 = SURGICARE CENTER OF UTAH  
       2nd floor (surgical floor) of The Eye Institute of Utah  
 411 = WASATCH ENDOSCOPY CENTER  
 412 = WASATCH SURGERY CENTER  
 413 = WESTERN MEDICAL SURGICAL CENTER  
       (Beginning 4th quarter 2000, is the west wing of Cache Valley Specialty Hospital)  
 414 = MOUNT OGDEN SURGICAL CENTER  
 415 = DAVIS SURGICAL CENTER  
 416 = JOHN MORAN EYE CENTER  
 417 = SOUTH TOWNE SURGICAL CENTER  
 418 = HEALTHSOUTH PARK CITY SURGICAL CENTER  
 419 = NORTHERN UTAH ENDOSCOPY CENTER  
 420 = RIDGELINE ENDOSCOPY CENTER  
 421 = ZION EYE INSTITUTE

### **Patient's Age (as of last birthday) at the Date of Discharge**

0 = 1 - 28 days  
 1 = 29 -365 days  
 2 = 1 - 4 years  
 3 = 5 - 9  
 4 = 10 - 14  
 5 = 15 - 17  
 6 = 18 - 19  
 7 = 20 - 24  
 8 = 25 - 29  
 9 = 30 - 34  
 10 = 35 - 39  
 11 = 40 - 44  
 12 = 45 - 49  
 13 = 50 - 54  
 14 = 55 - 59  
 15 = 60 - 64  
 16 = 65 - 69  
 17 = 70 - 74  
 18 = 75 - 79  
 19 = 80 - 84  
 20 = 85 - 89

21 = 90 +  
99 = Unknown  
blank = Not reported

## **Patient's Gender**

M = Male  
F = Female  
U = Unknown  
Blank = Not reported

## **Source of Admission**

- 1 = Physician Referral  
The patient was admitted to this facility upon the recommendation of his or her personal physician. (See code 3 if the physician has an HMO affiliation.)
- 2 = Clinic Referral  
The patient was admitted to this facility upon recommendation of this facility's clinic physician.
- 3 = HMO referral  
The patient was admitted to this facility upon the recommendation of a health maintenance organization (HMO) physician.
- 4 = Transfer from a hospital  
The patient was admitted to this facility as a transfer from an acute care facility where he or she was an inpatient.
- 5 = Transfer from a skilled nursing facility  
The patient was admitted to this facility as a transfer from a skilled nursing facility where he or she was an inpatient.
- 6 = Transfer from another health care facility  
The patient was admitted to this facility as a transfer from a health care facility other than an acute care facility or skilled nursing facility.
- 7 = Emergency Department  
The patient was admitted to this facility upon the recommendation of this facility's Emergency Department physician.
- 8 = Court/Law enforcement  
The patient was admitted to this facility upon the direction of a court of law, or upon the request of a law enforcement agency representative.
- 9 = Information not available  
The means by which the patient was admitted to this hospital is not known.
- Blank = Not reported

## Patient's Discharge Status

- 01 = Discharge to home or self care, routine discharge
- 02 = Discharge/transferred to another short-term general hospital
- 03 = Discharge/transferred to skilled nursing facility
- 04 = Discharge/transferred to an intermediate care facility
- 05 = Discharged/transferred to another type of institution
- 06 = Discharge/transferred to home under care of organized home health service organization
- 07 = Left against medical advice
- 08 = Discharged/transferred to home under care of a home IV provider
- 20 = Expired
- 40 = Expired at home
- 41 = Expired in a medial facility; i.e. hospital, skilled nursing facility, intermediate care facility, or free standing hospice
- 42 = Expired - place unknown
- 50 = Discharged/transferred to hospice - home
- 51 = Discharged/transferred to hospice – medical facility
- 61 = Discharged/transferred within institution to hospital based Medicare swing bed
- 62 = Discharged/transferred to another rehab facility including distinct part units in hospital
- 63 = Discharged/transferred to a long term care hospital
- 64 = Discharged/transferred to a nursing facility certified under Medicaid but not certified under Medicare
- 71 = Discharged/transferred/referred to another institution for outpatient (as per plan of care)
- 72 = Discharged/transferred/referred to this institution for outpatient services (as per plan of care)
- 09 = Unknown
- Blank = Not reported

## Patient's Residential Postal Zip Code

- 84000-84799 = Zip codes in Utah
- 4444=Homeless (word homeless or homeless code of ZZZZZ given as address)
- 5555=Unknown Utah (Unknown/invalid zip code with Utah address)  
(Note: If the city is present in the address but the zip code is not, the zip code variable is coded as -5555 while the county variable is coded with the actual county identifier)
- 8888=Unknown (completely missing address information)
- 9999=Outside U.S.A. (foreign address)

Helpful Hint: A quick way to identify the city associated with a zip code is to use the United States Postal Service website:  
[http://www.usps.gov/ncsc/lookups/lookup\\_ctystzip.html](http://www.usps.gov/ncsc/lookups/lookup_ctystzip.html)

If less than 30 encounters occurred for a Utah zip code area, this zip code was mapped into the county code:

Beave = Beaver  
BoxEl = Box Elder  
Cache = Cache  
Carbo = Carbon  
Dagge = Daggett  
Davis = Davis  
Duche = Duchesne  
Emery = Emery  
Garfi = Garfield  
Iron = Iron  
Milla = Millard  
Morga = Morgan  
MulCo = Multi-county (no longer used)  
Piute = Piute  
Rich = Rich  
SaltL = Salt Lake  
SanJu = San Juan  
Sanpe = Sanpete  
Sevie = Sevier  
Summi = Summit  
Tooel = Tooele  
Uinta = Uintah  
Washi = Washington  
Wayne = Wayne  
Weber = Weber

If less than 30 encounters occurred for a non-Utah zip code area, this zip code was mapped into the state code:

AL = ALABAMA  
AK = ALASKA  
AZ = ARIZONA  
AR = ARKANSAS  
CA = CALIFORNIA  
CO = COLORADO  
CT = CONNECTICUT  
DE = DELAWARE  
DC = DISTRICT OF COLUMBIA  
FL = FLORIDA  
GA = GEORGIA  
HI = HAWAII  
ID = IDAHO  
IL = ILLINOIS  
IN = INDIANA  
IA = IOWA  
KS = KANSAS  
KY = KENTUCKY  
LA = LOUISIANA

ME = MAINE  
MD = MARYLAND  
MA = MASSACHUSETTS  
MI = MICHIGAN  
MN = MINNESOTA  
MS = MISSISSIPPI  
MO = MISSOURI  
MT = MONTANA  
NE = NEBRASKA  
NV = NEVADA  
NH = NEW HAMPSHIRE  
NJ = NEW JERSEY  
NM = NEW MEXICO  
NY = NEW YORK  
NC = NORTH CAROLINA  
ND = NORTH DAKOTA  
OH = OHIO  
OK = OKLAHOMA  
OR = OREGON  
PA = PENNSYLVANIA  
RI = RHODE ISLAND  
SC = SOUTH CAROLINA  
SD = SOUTH DAKOTA  
TN = TENNESSEE  
TX = TEXAS  
UT = UTAH  
VT = VERMONT  
VA = VIRGINIA  
WA = WASHINGTON  
WV = WEST VIRGINIA  
WI = WISCONSIN  
WY = WYOMING  
PR = PUERTO RICO  
GU = GUAM



### **Patient's Residential County**

- 1= Box Elder
- 2= Cache
- 3= Rich
- 4= Morgan
- 5= Weber
- 6= Davis
- 7= Salt Lake
- 8= Summit
- 9= Tooele
- 10= Utah
- 11= Wasatch
- 12= Daggett
- 13= Duchesne
- 14= Uintah
- 15= Juab
- 16= Millard
- 18= Sanpete
- 17= Piute
- 19= Sevier
- 20= Wayne
- 21= Carbon
- 22= Emery
- 23= Grand
- 24= San Juan
- 25= Beaver
- 26= Garfield
- 27= Iron
- 28= Kane
- 29= Washington
- 30= Multi-County (used in earlier versions of data set--the category has been eliminated)
  
- 44= Homeless (word "homeless" or homeless code of ZZZZZ given as address)
- 55= Unknown Utah (unknown city & zip but "Utah" or in address or invalid zip code beginning with 84)
- 77= Outside Utah (but in U.S.A.)
- 88= Unknown (completely missing address information)
- 99= Outside U.S.A. (foreign address)

### **Suggested Division of Local Areas**

The data analyst might find one of the following three grouping schemes useful for combining data according to patient county of residence:

Definition	County Code (see above)
1. Urban vs. Rural	
Urban Areas	5,6,7,10
Rural Areas	1-4, 8-9, 11-29
Exclude from analysis	30,44,55,77,88,99
2. Wasatch Front Area	
Yes	5,6,7,10
No	30,44,55,77,88,99
Exclude from analysis	
3. Local Health Districts	
Bear River	1-3
Weber-Morgan	4-5
Davis County	6
Salt Lake County	7
Summit County	8
Tooele County	9
Utah County	10
Wasatch County	11
Uintah Basin (TriCounty)	12-14
Central Utah	15-20
Southeastern Utah	21-24
Southwest Utah	25-29

**Patient's Cross-County Migration Status**

hospital in different county than patient residence

Y = Yes (includes out-of-state, foreign, homeless, out-of-county)

N = No (from same county)

U = Unknown (includes unknown and unknown but Utah residence)

**Principal Diagnosis Code**

The first four digits of ICD-9-CM code. Refer to *International Classification of Diseases (9th Revision): Clinical Modification* for description.

There is an "implied" decimal point between the 3rd and 4th digit (decimal point is part of ICD-9-CM code but has been stripped out of data).

Blank = Not reported

ICD-9-CM E-Codes and V-Codes might also be found in this field.

The ICD-9-CM diagnosis codes, as well as the E-Codes and V-Codes can be looked up on the Internet at Yaki Technologies' Website [www.eicd.com/eicdmain.htm](http://www.eicd.com/eicdmain.htm) .

**Secondary Diagnosis Code 1 ... Secondary Diagnosis Code 8**

Definition is the same as Principal Diagnosis Code.

**Procedure Code Type**

- 0 = ICD-9-CM codes only were reported by the hospital
- 1 = CPT-4 codes only were reported by the hospital
- 2 = Both ICD-9-CM and CPT-4 codes were reported by the hospital

**Procedure Code 1 as CPT**

The five digits of CPT-4 code, followed by optional numeric or character qualifiers. Refer to *Physicians Procedure Current Terminology* for description.

Blank = Not reported

**Procedure Code 2 as CPT ... Procedure Code 6 as CPT**

Definition same as Procedure Code 1 as CPT.

**Procedure Code 1 as ICD9**

The four digits of ICD-9-CM code. Refer to *International Classification of Diseases (9th Revision): Clinical Modification* for description.

There is an “implied” decimal point between the 2nd and 3rd digit (decimal point is part of ICD-9-CM code but has been stripped out of data).

Blank = Not reported

**Procedure Code 2 as ICD9 ... Procedure Code 6 as ICD9**

Definition same as Procedure Code 1 as ICD9.

**Total Charge**

Total dollars and cents amount charged for the visit (with 2 decimal digits).

blank = Not Reported

**Primary Payer Category**

01 = Medicare

02 = Medicaid

03 = Other government

04 = Blue Cross/Blue Shield

05 = Other commercial (not BC/BS)

06 = Managed care

07 = Self pay

08 = Industrial and worker's compensation

09 = Charity/Unclassified

10 = Unknown

13 = CHIP (Children's Health Insurance Plan)

Blank = Not reported

**Secondary Payer Category, Tertiary Payer Category**

Descriptions are the same as primary payer category.

**Discharge Quarter**

1 = First Quarter (January 1 to March 31)

2 = Second Quarter (April 1 to June 30)

3 = Third Quarter (July 1 to September 30)

4 = Fourth Quarter (October 1 to December 31)

**Record ID Number**

A unique number for each visit, which is also unique across all years that ambulatory surgery data are available.

### **First Procedure Category**

Broad category for first procedure.

These categories match the required ambulatory surgical procedure reporting categories, based on procedure code ranges (see page 1). These categories are very broad, and so they may not produce a meaningful summary of the data for many analytic purposes.

- 0 = No match for Procedure Category
- 1 = Musculoskeletal
- 2 = Respiratory
- 3 = Cardiovascular
- 4 = Lymphatic/Hematic
- 5 = Diaphragm
- 6 = Digestive System
- 7 = Urinary
- 8 = Male Genital
- 9 = Laparoscopy
- 10= Female Genital
- 11= Endocrine/Nervous
- 12= Eye
- 13= Ear
- 14= Nose, Mouth, Pharynx
- 15= Mastectomy

### **Second Procedure Category ... Sixth Procedure Category**

Broad category for 2nd through 6th procedures.

Categories are same as first procedure category shown above.

# APPENDIX A

## UTAH HOSPITALS WITH AMBULATORY SURGICAL FACILITIES AND FREE STANDING AMBULATORY SURGICAL CENTERS PROFILE

## FACILITY CHARACTERISTICS: 2002

ID <sup>1</sup>	FACILITY NAME	OWN <sup>2</sup>	AFFILIATION	COUNTY	CITY	U/R <sup>3</sup>	TEACH <sup>4</sup>	BEDS
111	Allen Memorial Hospital	G	Rural Health Mgmt	Grand	Moab	R	N	38
118	Alta View Hospital	N	IHC, Inc.	Salt Lake	Sandy	U	N	70
136	American Fork Hospital	N	IHC, Inc.	Utah	American Fork	U	N	72
134	Ashley Valley Medical Center	I	LifePoint Hospitals, Inc.	Uintah	Vernal	R	N	39
104	Bear River Valley Hospital	N	IHC, Inc.	Box Elder	Tremonton	R	N	20
101	Beaver Valley Hospital	G	Freestanding	Beaver	Beaver	R	N	36
103	Brigham City Community Hospital	I	MountainStar Healthcare	Box Elder	Brigham City	R	N	49
145	Cache Valley Specialty Hospital	I	National Surgical Hospital	Cache	North Logan	R	N	8
106	Castleview Hospital	I	LifePoint Hospitals, Inc.	Carbon	Price	R	N	84
401	Central Utah Surgical Center	I	ASC Group	Utah	Provo	U	N	5
113	Central Valley Medical Center	N	Rural Health Mgmt	Juab	Nephi	R	N	19
119	Cottonwood Hospital Medical Center	N	IHC, Inc.	Salt Lake	Murray	U	N	213
415	Davis Surgical Center	I	ASC Group	Davis	Layton	U	N	4
108	Davis Hospital & Medical Center	I	IASIS Health Care	Davis	Layton	U	N	126
116	Delta Community Medical Center	N	IHC, Inc.	Millard	Delta	R	N	20
140	Dixie Regional Medical Center	N	IHC, Inc.	Washington	St. George	R	N	137
115	Fillmore Community Medical Center	N	IHC, Inc.	Millard	Fillmore	R	N	20
110	Garfield Memorial Hospital	N	IHC, Inc.	Garfield	Panguitch	R	N	44
129	Gunnison Valley Hospital	G	Rural Health Mgmt	Sanpete	Gunnison	R	N	26
418	HealthSouth Park City Surg Ctr	I	HealthSouth	Summit	Park City	R	N	2
407	HealthSouth Salt Lake Surg Ctr	I	HealthSouth	Salt Lake	Salt Lake City	U	N	8



ID <sup>1</sup>	FACILITY NAME	OWN <sup>2</sup>	AFFILIATION	COUNTY	CITY	U/R <sup>3</sup>	TEACH <sup>4</sup>	BEDS
139	Heber Valley Medical Center	N	IHC, Inc.	Wasatch	Heber	R	N	19
403	Intermountain Surgical Center	N	IHC, Inc.	Salt Lake	Salt Lake City	U	N	4
416	Moran Eye Center	G	Freestanding	Salt Lake	Salt Lake City	U	Y	10
117	Jordan Valley Hospital	I	IASIS Health Care	Salt Lake	West Jordan	U	N	50
114	Kane County Hospital	G	Freestanding	Kane	Kanab	R	N	38
107	Lakeview Hospital	I	MountainStar Healthcare	Davis	Bountiful	U	N	128
121	LDS Hospital	N	IHC, Inc.	Salt Lake	Salt Lake City	U	Y	520
105	Logan Regional Hospital	N	IHC, Inc.	Cache	Logan	R	N	147
141	McKay-Dee Hospital Center	N	IHC, Inc.	Weber	Ogden	U	Y	269
404	McKay-Dee Surgical Center	N	IHC, Inc.	Weber	Ogden	U	Y	6
102	Milford Valley Memorial Hospital	G	Rural Health Mgmt	Beaver	Milford	R	N	34
414	Mount Ogden Surgical Center	I	ASC Group	Weber	Ogden	U	Y	2
137	Mountain View Hospital	I	MountainStar Healthcare	Utah	Payson	U	N	116
419	Northern Utah Endoscopy Center	I	ASC Group	Cache	Logan	R	N	2
142	Ogden Regional Medical Center	I	MountainStar Healthcare	Weber	Ogden	U	N	227
135	Orem Community Hospital	N	IHC, Inc.	Utah	Orem	U	N	20
307	The Orthopedic Specialty Hospital	N	IHC, Inc.	Salt Lake	Salt Lake City	U	N	14
126	Pioneer Valley Hospital	I	IASIS Health Care	Salt Lake	West Valley	U	Y	139
122	Primary Children's Medical Center	N	IHC, Inc.	Salt Lake	Salt Lake City	U	N	232
405	Provo Surgical Center	I	HealthSouth	Utah	Provo	U	Y	5
420	Ridgeline Endoscopy Center	I	Freestanding	Weber	Ogden	U	N	2
408	St. George Surgical Center	I	Freestanding	Washington	St. George	R	N	4
406	Salt Lake Endoscopy Center	I	Freestanding	Salt Lake	Salt Lake City	U	N	2
120	Salt Lake Regional Medical Center	I	IASIS Health Care	Salt Lake	Salt Lake City	U	Y	168

ID <sup>1</sup>	FACILITY NAME	OWN <sup>2</sup>	AFFILIATION	COUNTY	CITY	U/R <sup>3</sup>	TEACH <sup>4</sup>	BEDS
128	San Juan Hospital	G	Managed	San Juan	Monticello	R	N	34
130	Sanpete Valley Hospital	N	IHC, Inc.	Sanpete	Mt. Pleasant	R	N	20
132	Sevier Valley Hospital	N	IHC, Inc.	Sevier	Richfield	R	N	42
417	South Towne Surgery Center	I	Freestanding	Salt Lake	Sandy	U	N	4
124	St. Mark's Hospital	I	MountainStar Healthcare	Salt Lake	Salt Lake City	U	Y	294
409	St. Mark's Outpatient Surgical Cntr	I	MountainStar Healthcare	Salt Lake	Salt Lake City	U	Y	4
410	SurgiCare Center of Utah	I	Freestanding MountainStar	Salt Lake	Salt Lake City	U	N	4
144	Timpanogos Regional Hospital	I	MountainStar Healthcare	Utah	Orem	U	N	47
133	Mountain West Medical Center	G	Rural Health Mgmt	Tooele	Tooele	R	N	35
109	Uintah Basin Medical Center	G	Freestanding	Duchesne	Roosevelt	R	N	42
125	University of Utah Hospital	G	Freestanding	Salt Lake	Salt Lake City	U	Y	425
138	Utah Valley Regional Medical Center	N	IHC, Inc.	Utah	Provo	U	N	395
112	Valley View Medical Center	N	IHC, Inc.	Iron	Cedar City	R	N	42
411	Wasatch Endoscopy Center	I	MountainStar Healthcare	Salt Lake	Salt Lake City	U	Y	2
412	Wasatch Surgery Center	G	Freestanding	Salt Lake	Salt Lake City	U	Y	2
421	Zion Eye Institute	I	Freestanding	Washington	St. George	R	N	2

<sup>1</sup>Facility ID number. See page 9 for facility list in numerical order.

<sup>2</sup>Owner category: G=Government, N=Not for Profit, I=Investor-Owned.

<sup>3</sup>Urban or Rural location of facility.

<sup>4</sup>Teaching facility (Yes or No).

**Note:** The facilities with addresses, phone numbers, and number of beds in the above list, can be obtained as a “cut and paste” document from the website <http://health.utah.gov/hda/usersupport.htm> and click on “List of data providers”.

An alternative source for a list of Utah hospitals and ambulatory surgery centers is the Utah Department of Health Website, <http://health.utah.gov/licensing> and click on “Health Facilities”.